PATENT APPLICATION FEE DETERMINATION RECORD

Effective January 1, 2003

Application or Docket Number

10644888

(Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			92				-	RATE	FEE	ſ	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		ВА	SIC FEE	375.00	OR	BASIC FEE	750.00
TOTAL CHARGEABLE CLAIMS			ှိ 🤊 minus 20=		* 2			X\$ 9=	18.00	OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* 7			X42=	294,00	OR	X84=	
MU	LTIPLE DEPEN	DENT CLAIM P	RESENT					+140=	~ 1	OR	+280=	
* If the difference in column 1 is less than zero, enter "0" in col						olumn 2	<u>_</u>	OTAL	687.00	OR	TOTAL	
	C	LAIMS AS A	MENDED - PART II								OTHER THAN	
		(Column 1)		(Colu		(Column 3)	9	MALL E	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	IBER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	- 01 4114			X42=		OR	X84=	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									OR	+280=	
								TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	mn 2)	(Column 3)	۸۵	DII. 1 EE 1	\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	•	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUN PREVI	HEST MBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***				X42=		OR	X84=	
Ĺ	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDEN	T CLAIM			+140=		OR	+280=	
							ΑC	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colu	ımn 2)	(Column 3)	,					
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREV	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N ON	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
ME	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESI	ENTATION OF N	MULTIPLE DE	PENDEN	IT CLAIM	1		+140=		OR	+280=	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
**	*If the "Highest N	umber Previously I umber Previously mber Previously P	Paid For" IN Th	HS SPACE	is less th	an 3, enter "3."		DIT. FEE d in the ap	propriate bo		ADDIT. FEE olumn 1.	<u> </u>